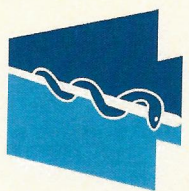


CLINICAL LABORATORY PERMIT



pennsylvania
DEPARTMENT OF HEALTH

Pursuant to the act of September 26, 1951, P.L. 1539 as amended, a Permit to operate a Clinical Laboratory is hereby granted to:

Laboratory Identification Number: 00168A

Name and Director of Laboratory:

UPMC PRESBYTERIAN SHADYSIDE
SAMUEL YOUSEM
200 LOTHROP ST
ROOM A608 ANATOMIC PATHOLOGY
PITTSBURGH, PA 15213-2582


Owner:

UPMC PRESBYTERIAN SHADYSIDE

ISSUE DATE: August 15, 2017

DATE EXPIRES: August 15, 2018

AUTHORIZED CATEGORIES/TESTS:
EXFOLIATIVE CYTOLOGY
TISSUE PATHOLOGY


Rachel L. Levine, MD
Acting Secretary of Health

DISPLAY THIS CERTIFICATE PROMINENTLY
This permit is subject to revocation, suspension, or limitation for violation of the Act or the Regulations promulgated thereunder.